#### **Attachment 3**

# **Director for Partnerships**

Finance & Growth

Deliver a surplus to clear our deficit

Efficiency

**Ensure economy and** efficiency

**Quality & Patient** Satisfaction

Deliver safe, high quality care that patients feel meets their needs

Workforce

Attract, retain and motivate an appropriately trained workforce



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# Finance and Activity

Data available in Finance report to board

# Efficiency

Data Quality: (H) = High (M) = Medium (L) = Low

	Watford	Data Quality	St Albans	Data Quality	CHKS Peer Group	Data Quality
Elective length of stay	4.4 days	(H)	2.7 days	(H)	3.6 days	(M)
Non elective length of stay (including zero lengths of stay)					4.4 days	(M)
Zero length of stay for emergency	25%	(H)			24%	(M)
Pre-operative bed days	95	(H)	41	(H)	Not in CHKS	
Bed occupancy	91%	(M)	66%	(M)	Not in CHKS	
ICU occupancy	95%	(M)				
Theatre utilisation (% session time used)	81%	(M)	80%	(M)	Not in CHKS	
Day case rate (basket of 25) Trus	t		77.9%	(H)	Target	: 80%
NHS Indicators scorecard – Q3 2 (latest available)	2011-12	National ran (out of 167)	nking	Q4 to Q1	Productivity opp	oortunity
Length of stay		38	(H)		£1.3 millio	n (M)
First to follow-up ratio	132	(H)		£ 2.3 millio	n (M)	
Reducing pre-op bed days - elec	76	(H)		£ 53,585	(M)	
Outpatient Appointment DNA		68	(H)		£ 215,059	(M)

Trend graphs: •Appendix 2

Further information in Trust Board Papers:

•NHS Indicators quarterly scorecard for the Trust



# **Quality and Patient Satisfaction**

External reporting	Month	Asse	essment scale
NHS EoE Governance Rating *  * Based upon Monitor Compliance Framework for FTs in 2010-11	Self assessed as 0.5	>2.9 2-2.9 1-1.9 <1	Red Amber/Red Amber/Green Green

Patient focus	Annual Plan 10/11	CHKS SHMI	Data Quality	CHKS 2011 Peer Group	Data Quality	Dr Foster*	Data Quality
Hospital SHMI (Nov 11 – Apr 12)	Less than 90	75	(M)	72	(M)		
Hospital SMR (July 11 – Sep 11)	Less than 100					102	(M)
Emerg. readmit within 30 days (Apr 12)			(M)	3.0%	(M)		

\* Dr Foster Real Time Monitor figures rebased and supplied by SHA, reflecting overall Trust mortality rates over a full year.

Patient focus	Annual Plan 11/12	Month actual	Data Quality	Year to date	Data Quality
Number of Serious Incidents (Mar 12)		5	(H)	5	(H)
Emergency readmissions of elective patients within 30 days		2.1%	(H)	2.1%	(H)
Same day cancellation of elective surgery	<0.8%	32 = 1.0%	(H)	32 = 1.0%	(H)
Cancelled operations treated within 28 days	100%	87.5%	(H)	87.5	(H)
Number of complaints received (Mar)		48	(H)	510	(H)
% of complaints responded to in-month within agreed deadline (Feb) Provisional	80%	47%	(H)	55%	(H)

Trend graphs:

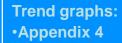
Further information in Trust Board Papers:

•Appendix 3
•Monthly NHS EoE Governance return, Monthly performance report, Monthly infection control report, Annual Picker survey report (and follow up reports)



# Workforce

Trust Board Workforce Stats												
Trust Wide	2012/13											
	Apr											
	WTE											
Contracted	3,528.5											
	,											
Worked - Permanent wte	3,440											
Worked - Bank wte	233											
Worked - Agency wte	78											
Total Worked	3,752.4	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar
	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'006	£'007	£'000	£'000	£'000
Permanent £'000	12501											
Overtime £'000	34											
Bank £'000	784											
Agency £0'000	514											
Total costs	13,832											
Overtime % Pay	0.2%											
Bank % Pay	5.7%											+
Agency % Pay	3.7%											+
Agency 70 Fay	3.776						ļ					
Appraisal Rate	93%											
Turnover Rate	12.40%											
Sickness Rate	4.10%											
Establishment	3842.8											
Vacancy (wte)	168.9											
Vacancy rate (%)	4.4%											
Statutory Training												
Mandatory Training												
, ,												
Turnover	21117											
	21117 1,298 6.15%											



Further information in Trust Board Papers:
• Annual Staff Survey Report , Quarterly workforce report



# Elective and Non Elective Emergency Readmissions

#### YTD April 2012/13

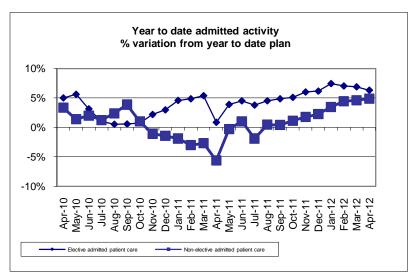
/iReporter/iR103 Inpatient ReadmissionsPBR Analysis Summary.aspx

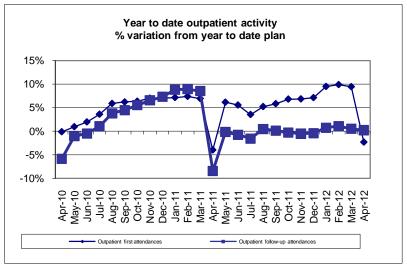
GroupBy	Original Admission Type													
Description	ActivityType	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total
	Readmissions	64	1											64
	Qualifying Discharges	2660												2660
	Readmission Rate %	2.40%	6											0.024
Elective	Excluded Discharges	458	5											455
	Readmissions	27	1											271
	Qualifying Discharges	2447	7											2447
	Readmission Rate %	11.10%	ó											0.111
NonElective	Excluded Discharges	1363												1363
	Readmissions	335	5											335
	Qualifying Discharges	510	7											5107
	Readmission Rate %	6.60%	ó											0.066
Total	Excluded Discharges	1818	3											1818

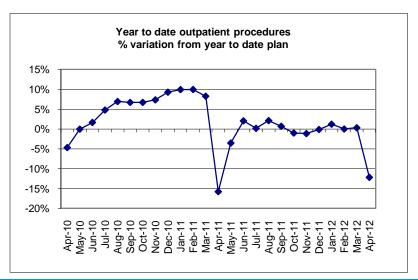
Month Non Elec Readmission Target 171 176.7 171 176.7 176.7 171 176.7 171 176.7 171 176.7 170.7 159.6 176.7 2080.5

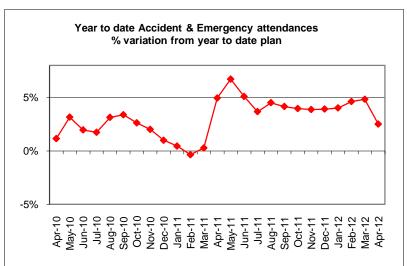
Monthly Variance 100

### Appendix 1 – Finance and growth trend graphs

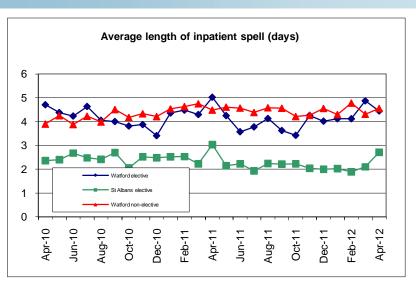


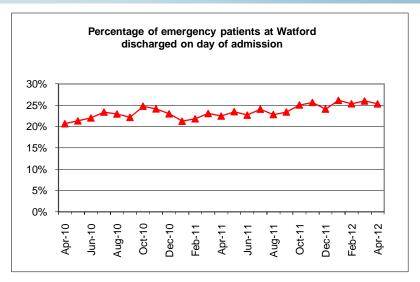


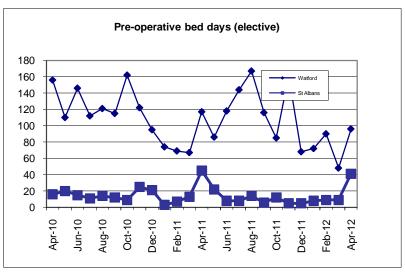


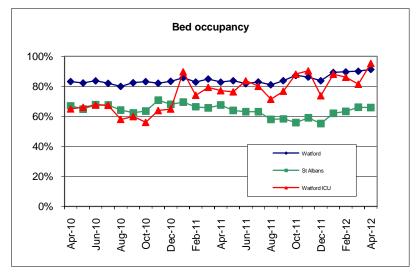


### Appendix 2 – Efficiency trend graphs

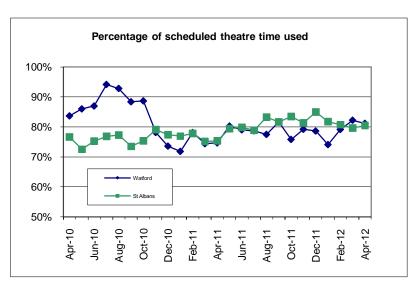


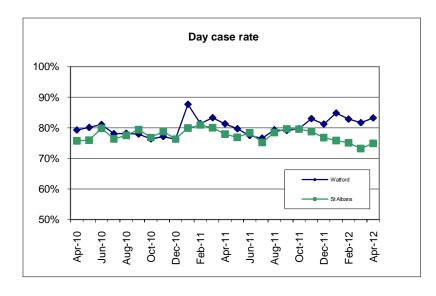


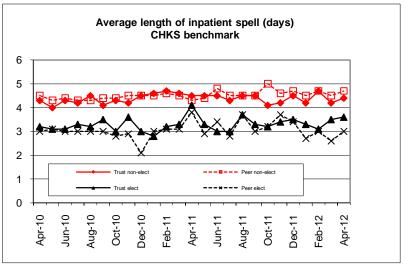




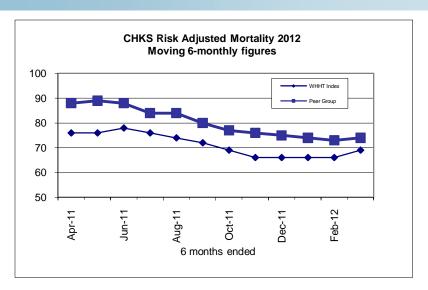
# Appendix 2 – Efficiency trend graphs - continued

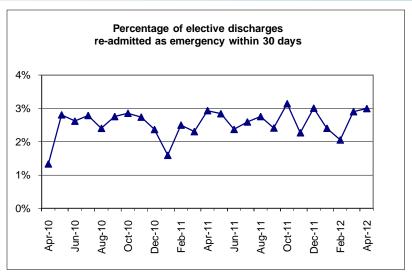


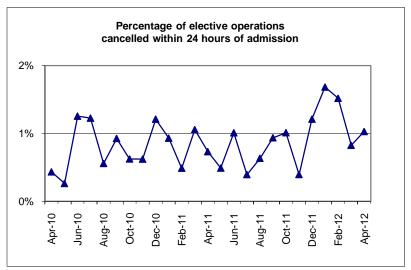




### Appendix 3 – Quality and Patient Satisfaction trend graphs







### Appendix 4 – Workforce trend graphs

